

Characterisation of co-morbidities in patients with alcoholic liver disease and engaging them in treatment.

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Trivia

- Economic burden of Alcoholic Liver disease (ALD)
 1. 40 million AUD
 2. 500 million AUD
 3. 4 billion AUD
 4. None of the above

Alcoholic Liver Disease (ALD): a significant disease burden

- Alcoholic Liver Disease (ALD) is the most prominent endpoint of alcohol excess.
- Neglected clinical area with an estimated total economic burden of AUD3.8 billion per year.
- Associated with a significant mortality and 2 of 3 ALD patients have associated morbidity .
- Co-morbidities in these patients remain undefined.
- No effective treatment to date except abstinence and liver transplant.
- There is lack of appropriate strategies to achieve abstinence in this population .

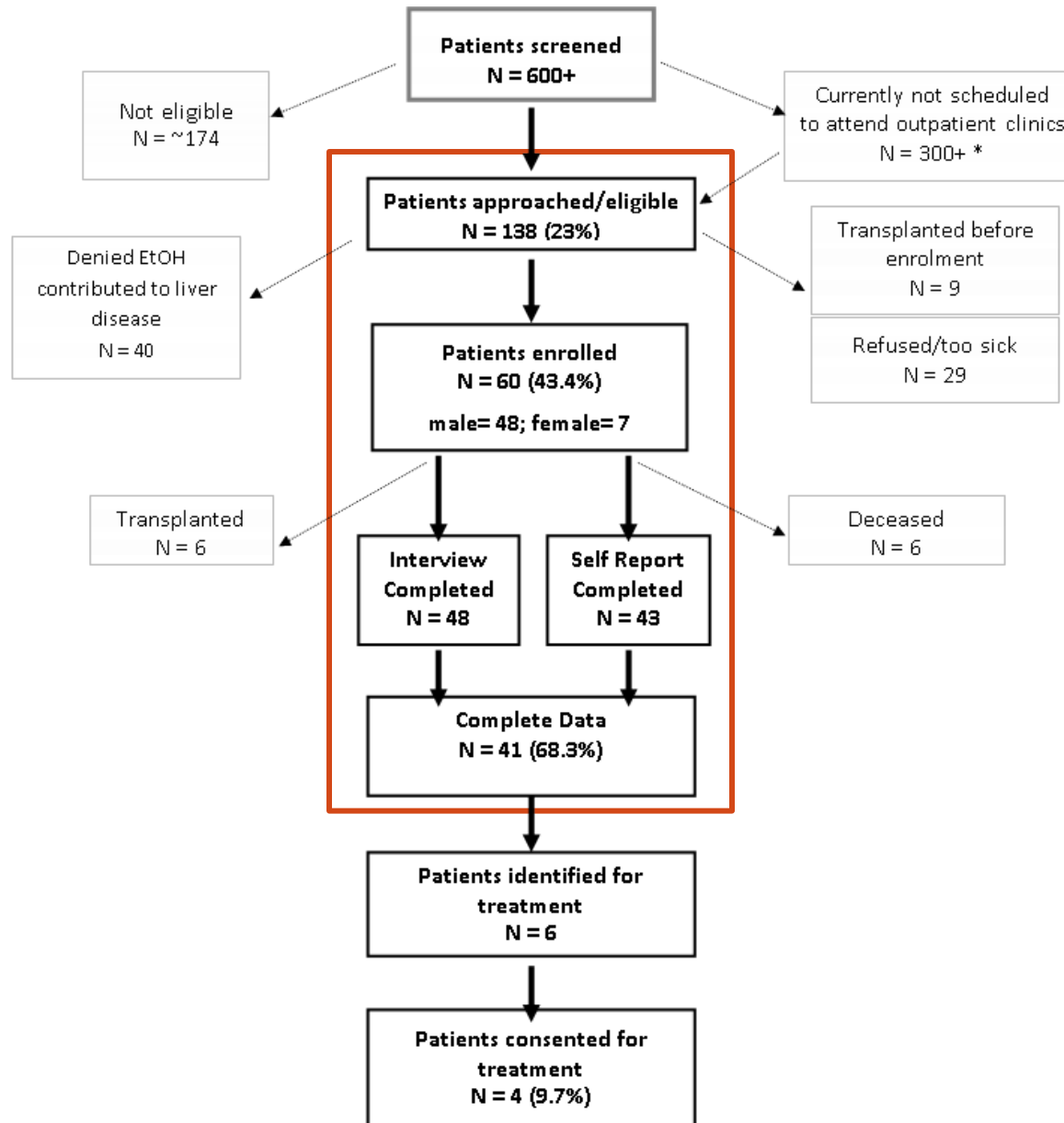
Aims of the study

- To characterise co-morbidities in patients with alcoholic liver disease.
- To determine if co-morbidities act as barrier to the treatment.
- To engage patients into multi-disciplinary treatment for co-morbidities to improve overall clinical outcome.

Methods

- Recruitment: Liver and Drug Health Clinics at RPAH (HREC/10/RPAH/421)
- Eligibility: ALD with comorbid conditions (HepC, HCC, mental health)
- Semi-structured interviews & self administered questionnaires:
 - Alcohol history (TFLB), AUDIT, dependence (SADD), craving (PENN), recognition (DRINC), readiness to change (SOCRATES)
 - Demographics
 - Physical examination
 - Clinical, Biochemical, Anthropomorphic
- Mental health assessment
 - Mini International Neuropsychiatric Interview (MINI): major depression, manic episode, PTSD, alcohol dependence, suicidality, general anxiety and antisocial behaviour
 - Anxiety & depression (HADS), quality of life (WHOQOL), mental state (MMSE)
- Routine Reviews: Researchers, Clinical Psychologist, Hepatologist
- Identify patients with co-morbid conditions
- Participants with mental health issues approached for recruitment into the multi-disciplinary clinic

Recruitment



Disease Progression

	Actively drinking (%)	Not actively drinking (%)	P value
Ascites	9/15 (60)	30/36 (83.3)	0.08
Encephalopathy	6/15 (40)	19/36 (52.8)	0.42
O. Varices	6/15 (40)	24/36 (66.7)	0.08
HCC	4/15 (26.7)	12/36 (33.3)	0.65
Deceased	1/18 (5.6)	4/39 (10.3)	0.57

Biochemical Markers

	Actively drinking Mean (SD) N=15	Not actively drinking Mean (SD) N=36	P value
MELD	14.18 (7.3)	17.3 (8.32)	0.19
INR	1.2 (0.27)	1.5 (0.47)	0.02*
Albumin	37.5 (6.4)	33.1 (7.3)	0.04*
Bilirubin	37.9 (44.1)	97.03 (163)	0.15
Creatinine	82.24 (46.2)	88.35 (45.8)	0.65

Alcohol: Features of Dependence

	Actively drinking Mean (SD) N=11	Not actively drinking Mean (SD) N=26, 29, 20	P value
Alcohol dependence (SADD)	15.45 (10.07)	5.54 (12.03)	0.02*
Alcohol Craving (PENN)	15.18 (9.18)	4.69 (8.90)	0.002*
Recognition (SOCRATES)	26.91 (9.71)	18.70 (8.34)	0.02*

Alcohol and mental health problems

	Actively drinking (%)	Not actively drinking (%)	P value
Major depression (current)	6/15 (40)	4/32 (12.5)	0.03*
Post traumatic stress disorder (PTSD)	6/15 (40)	4/32 (12.5)	0.03*
Antisocial personality	3/15 (20)	3/32 (9.4)	0.32
Generalised anxiety disorder	4/15 (26)	3/32 (9.4)	0.13

Disease Progression

	HCV (%)	Non HCV (%)	P value
Ascites	18/27 (66.7)	21/26 (87.5)	0.08
Encephalopathy	11/27 (40.7)	14/24 (58.3)	0.22
O.Varices	18/27 (66.7)	12/24 (50)	0.24
HCC	13/27 (48.1)	3/24 (12.5)	0.005*
Deceased	3/31 (9.7)	2/26 (7.7)	0.80

Biochemical markers

	HCV Mean (SD) N=28	NON HCV Mean (SD) N=26	P value
MELD	17.29 (9.03)	15.23 (6.87)	0.36
INR	1.5 (0.51)	1.5 (0.32)	0.17
Albumin	34.4 (8.01)	35.04 (6.5)	0.62
Bilirubin	104.4 (186.4)	50.42 (43.30)	0.16
Creatinine	80.46 (30.22)	92.85 (57.74)	0.32

Alcohol: Features of Dependence

	HCV Mean (SD) N=19,21,14	NON HCV Mean (SD) N=18,19,17	P value
Alcohol dependence (SADD)	7.32 (10.32)	9.72 (14.19)	0.56
Craving (PENN)	6.19 (9.03)	9.11 (11.12)	0.37
Recognition (SOCRATES)	22.21 (9.36)	21.12 (9.98)	0.76

Alcohol and Mental health problems

	HCV (%)	NON HCV (%)	P value
Major depression (current)	6/24 (25)	4/23 (17.4)	0.53
Post traumatic stress disorder (PTSD)	7/24 (29.2)	3/23 (13)	0.19
Antisocial personality	5/24 (20.8)	1/23 (4.3)	0.09
Generalised Anxiety disorder	4/24 (16.7)	3/23 (13)	0.73

MELD predictors ?

	Adjusted R ²	R ² change	Sig F change
1. HCV, Sex	-0.12	.024	.523
2. Actively drinking	-0.12	.019	.311
3. Packyears, SADD, AUDIT, SOCRATES	.048	.175	.201
4. SBQR, Depression, Anxiety	.078	.074	.229

Quality of Life (QOL) predictors ?

QOL predictors ?	Adjusted R ²	R ² change	Sig F change
1. MELD, HCV, sex	.025	.077	.231
2. Actively drinking	.006	.000	.991
3. Packyears, SADD, AUDIT, SOCRATES,	.063	.170	.209
4. SBQR, Depression, Anxiety	.162	.124	.053

Summary and Conclusion

- Study is ongoing - preliminary analysis
- 6 out of the 41 on which complete data was available were found eligible for the treatment and so far 4 have been consented for the treatment
- Prevalence of alcohol dependence, depression and PTSD are higher in patients who are actively drinking
- Prevalence of HCC was significantly higher in patients with HepC
- Psychological intervention may help improve QOL in ALD patients

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Discussion and comments



"I guess what I miss most is being drunk."